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Bib Data Sheet

CONFIRMATION NO. 6183

SERIAL NUMBER 10/675,417	FILING DATE 09/30/2003 RULE	CLASS 438	GROUP ART UNIT 2822	ATTORNEY DOCKET NO. 100179
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APPLICANTS

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** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 12/31/2003

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature Initials	STATE OR COUNTRY IL	SHEETS DRAWING 4	TOTAL CLAIMS 30	INDEPENDENT CLAIMS 4
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ADDRESS

029050

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TITLE

METHOD OF FORMING A CURRENT CONTROLLING DEVICE

FILING FEE RECEIVED 1036	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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